

ABSENTEE BALLOT APPLICATION

NAME: _____
MAILING _____

PHYSICAL _____
PHONE: () _____

MONO COUNTY ELECTIONS DIVISION
P.O. BOX 237
BRIDGEPORT, CA 93517

FAX:
760-932-5531

ADDRESS TO SEND BALLOT TO (IF DIFFERENT THAN MAILING ABOVE)

SIGNATURE

TYPE OR PRINT NAME

DATE

Deadline: October 31, 2006

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